

CHAPTER 10
SECTION 6.1

TRICARE FOR LIFE

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AUTHORITY:

I. DESCRIPTION

Pursuant to Section 712 of the FY 2001 National Defense Authorization Act, Medicare eligible beneficiaries based on age, whose TRICARE eligibility is determined by 10 U.S.C. Section 1086, are eligible for Medicare Part A, and are enrolled in Medicare Part B, are eligible for the TRICARE benefit effective October 1, 2001.

II. POLICY

A. Introduction:

Section 712 extends TRICARE eligibility to persons who would otherwise have lost their TRICARE eligibility due to attainment of entitlement to hospital insurance benefits under Part A of Medicare based on age. In order for these individuals to retain their TRICARE eligibility, they must be enrolled in the supplementary medical insurance program under Part B of Medicare. In general, in the case of medical or dental care provided to these individuals for which payment may be made under both Medicare and TRICARE, Medicare is the primary payer and TRICARE will normally pay the actual out-of-pocket costs incurred by the person.

B. Eligibility:

The contractors shall determine from the Defense Enrollment Eligibility Reporting System (DEERS) if the individual is eligible for the TRICARE benefit.

C. Beneficiaries are not eligible to enroll in TRICARE Prime.

D. Claims will be reimbursed with the applicable reimbursement sections of the TRICARE Policy, Reimbursement, and Operations manuals.

E. Appeal rights are covered in the TRICARE Operations Manual, [Chapter 13](#).

F. The contractor shall educate beneficiaries about this benefit as identified by the government.

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